2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# N04000002043

Entity Name: GRACE AND MERCY DELIVERANCE MINISTRIES INC.

Current Principal Place of Business:

1002 A. PHILLIP RANDOLPH BLVD
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

6736 GASPAR CIRCLE WEST
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 20-0420886 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAISE, LORAINE
6736 GASPAR CIRCLE WEST
JACKSONVILLE, FL 32219 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DAISE, LORAINE
Address: 6736 GASPAR CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32219

Title: DS ( ) Delete
Name: NOISETTE, SHERLYN
Address: 3148 SEARCH WOOD DR
City-St-Zip: JACKSONVILLE, FL 32277

Title: DT ( ) Delete
Name: HARRELL, ROBERT
Address: 3133 TALL PINE LN
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change ( ) Addition
Name: FORD, RAY
Address: 6736 GASPAR CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32219

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORAINE A. DAISE DP 07/03/2006

Electronic Signature of Signing Officer or Director — Date